

California Medical Association



NOTICES AND REPORTS

Council Meeting Minutes

534th Meeting

Tentative Draft: 534th Meeting of the Council, Los Angeles, Airport-Marina Hotel, 8 July 1967.

The meeting was called to order by Chairman Miller at the Airport-Marina Hotel on Saturday, 8 July 1967, at 9:45 a.m.

A quorum was present and acting (full roll call, including names of invited guests, appears in Item 37).

1. Minutes for Approval

The minutes of the 533rd meeting of the Council, held 27 May 1967, were approved as distributed.

JOHN G. MORRISON, M.D.	President
MALCOLM C. TODD, M.D.	President-Elect
WILLIAM F. QUINN, M.D.	Speaker
JOSEPH F. BOYLE, M.D.	Vice-Speaker
ALBERT G. MILLER, M.D.	Chairman of the Council
HAROLD KAY, M.D.	Vice-Chairman of the Council
HELEN B. WEYRAUCH, M.D.	Secretary
DWIGHT L. WILBUR, M.D.	Editor
ROBERT L. THOMAS	Executive Director

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2. Appointment of New Executive Director

ACTION: Voted to approve Howard Hassard's request that he resign as Executive Director (continuing as Legal Counsel).

ACTION: Voted to appoint Robert L. Thomas (previously Associate Executive Director) as Executive Director of the California Medical Association.

3. Payment to Physicians in County and Teaching Hospitals Under Medi-Cal

President Morrison reported that on 19 July the Health Review and Program Council would be considering recommendations relating to Section 32.6 of the 1967 State Budget Act (affecting payment to physicians rendering services under Medi-Cal in county and teaching hospitals). The Council reviewed CMA's previously adopted position that Title 18 regulations governing reimbursement of physicians rendering identifiable services in a county or teaching hospital setting (submission of attending physicians' bills on a reasonable charge basis with the amount of the charge to be determined by the carrier in the same manner and under the same rules as for all other physicians) also should be utilized in California's implementation of Title 19 (Medi-Cal).

ACTION: Voted to reaffirm CMA's position regarding payment for physician services in county and teaching hospitals under Medi-Cal and to express this reaffirmation to the Health Review and Program Council.

4. Contractual Relationships with Consumer Groups

Following discussion of possible problems that could arise if segments of medicine within Cali-

California enter into direct economic relationships with consumer groups without the consultation and advice of the prepayment organization officially sponsored by CMA (California Blue Shield), the Council adopted the following position:

ACTION: *Voted to urge component societies, medical specialty organizations, or other segments of organized medicine in the state to consult with California Blue Shield before entering into direct economic relationships with consumer groups.*

5. Acceptance of Federal Grants

After considering the need for establishing CMA policy regarding acceptance of Federal grants, the Council:

ACTION: *Voted to approve CMA's considering acceptance of Federal grants on a project-by-project basis.*

ACTION: *Voted to request the board of the California Medical Education and Research Foundation (CMERF) to prepare broad criteria to be used as guidelines in determining when federal funds should be considered, sought and recommended to be accepted (to be brought to the Council for approval).*

6. Request from Northern California Kidney Foundation

Chairman Miller reported that CMA had received from the Northern California Kidney Foundation a written request to use CMA's addressing facilities in their mailing of programs and pre-registration forms for the second annual Symposium on Kidney Disease 17 October 1967, Whitcomb Hotel, San Francisco. Doctor Miller pointed out that it was CMA policy to grant approval to such requests when they come from medical organizations sponsoring educational programs.

ACTION: *Voted to approve the request from the Northern California Kidney Foundation.*

7. Newly Elected American Medical Association Leaders

Chairman Miller expressed the pride of the CMA in having two newly elected AMA leaders from California: Dwight L. Wilbur, M.D., AMA President-Elect, and Burt L. Davis, M.D., member AMA Board of Trustees. It was pointed out that a meeting of the AMA Board precluded either physician from attending this meeting of the Council. However, Chairman Miller read a letter from Doctor Davis in which he expressed his appreciation for the support of the CMA Delegation to the AMA and the Council for his election. Doctor Davis' letter also pointed out that

Doctor Wilbur's election was uncontested and expressed confidence that he would do his usual excellent job in his new position of representing medicine for the entire nation.

8. Report of the President

President Morrison reported on the success of the CMA-Blue Shield Congressional Visitation, made 15 and 16 June in Washington, D.C. He stated that new avenues of communications had been opened in Washington—with friends of medicine as well as those who, in the past, have not seemed to understand medicine's position in health legislation. Doctor Morrison stated that the contacts made with staffs of Congressmen were as valuable, if not more so, than those made with the Congressmen themselves. Doctor Morrison said that this type of project should be followed in the future by similar efforts. Mr. John Pompelli in particular and the AMA Field Service in general were commended for their excellent help. Mr. Will Babb of the California Blue Shield staff also received special commendation for his work on the project. President Morrison's comments were echoed and enlarged upon by Doctors Miller, Boyle and Wilbur.

President Morrison also reported that plans for the meetings with component society presidents (approved by the Council 27 May 1967) were well underway, with a meeting of northern county presidents scheduled for 26 and 27 August and a meeting of southern county presidents scheduled for 30 September and 1 October. He said that an informal meeting of all component society presidents would again be held in conjunction with Annual Session next year. A date for the next Annual Conference of Component Society Officers was discussed, with the following result:

ACTION: *Voted to hold the next annual Conference of Component Society Officers in November 1968.*

9. California Medical Education and Research Foundation

Doctor Morrison discussed the allocation of monies recently received by the California Medical Education and Research Foundation (CMERF). With Council concurring, the \$75,000 gift from Audio-Digest Foundation will be used according to the following decisions by the CMERF Board, which voted to authorize distribution of \$2,500 to the LACMA library for a scholarship for a medical librarian trainee, \$30,000 to medical

schools to support departments of continuing education (specific policy for allocating this money to be determined by the Scientific Board), and \$40,000 for undergraduate merit and achievement scholarships for students entering the health fields. The new program will be called "The California Physicians Scholarship Fund." (The remaining \$2,500 is to be allocated later.)

Doctor Morrison also announced that CMERF had accepted a contract proposal from the Public Health Service to sponsor a conference in November on behalf of 13 western state medical associations that will explore "Future Directions and Decisions in Medical Care."

10. *Report of the President-Elect*

President-Elect Todd commented on his recent visits to physicians in northern counties and other meetings, including a national AMPAC Workshop. As chairman of the Committee on Committees, Doctor Todd gave a brief informational report. He mentioned several positions which are now open and announced that Doctor John Connolly, who was a consultant to the Committee on Cardiovascular Disease, now becomes a member of the committee by virtue of his membership in CMA.

11. *National Conference on Medical Care Costs*

Thomas C. Paton, president of California Blue Shield, presented a brief report on the National Conference on Medical Care Costs recently held in Washington, D.C. He stated that the conference did not attempt to reach any conclusions, rather, it served to alert those in the health care industry that drastic changes are going to evolve more rapidly than many would have supposed. There was grave concern expressed over the fact that in the last 10 years the consumer price index has risen just 19 per cent, while medical care costs have risen 42 per cent. Mr. Paton pointed out that throughout the conference, the terms "medical care costs" were erroneously used when "health care costs" would have been appropriate terminology. Mr. Paton said that he felt it would be a good idea to express to the national administration that Medicine seeks broader involvement in conferences of this type.

12. *Reports from Medical Schools*

Doctor Thomas Gonda, associate dean of Stanford University School of Medicine, expressed

appreciation for the allocation of CMERF monies for postgraduate and undergraduate physician education. He also announced that the Commonwealth Fund had made a \$500,000 grant to Stanford so that it could conduct a study of health care within the teaching hospital setting. Doctor Gonda expressed hope that results of the study would contribute innovations in health care.

Doctor Franz Bauer of USC School of Medicine made a progress report on USC's grant under P. L. 89-239. He announced that Doctor Donald Petit had been appointed as director of the resulting regional medical program.

Doctor Warren Bostick of UC-California College of Medicine and Doctor John Dillon of UCLA also made progress reports concerning their respective medical schools.

All of the medical school representatives expressed concern over section 32.6 of the 1967 State Budget Act (affecting payment to physicians rendering services under Medi-Cal in county and teaching hospitals). President Morrison assured them that their concern was shared by CMA (see item 3 of these minutes).

13. *UCLA School of Public Health*

Doctor L. S. Goerke, dean of the UCLA School of Public Health, commented on progress at his school, stating that the objective was to move from an undergraduate emphasis to an emphasis on master's and doctoral candidates. He stated that he felt the UCLA School of Public Health had the potential of being the strongest one in the country because of its close relationship with medicine.

14. *State Health and Welfare Agency*

Mr. Spencer Williams, administrator of the Health and Welfare Agency, reported to the Council on the current fiscal status of the Medi-Cal program and expressed concern that further program adjustments may become necessary. He said that these could fall in three different areas: (1) modification of eligibility requirements, (2) changes in the scope, amount or duration of services, and (3) limitation in the prices paid for services. He said that the agency was investigating the possibility of instituting a system of partial payment by patients for certain services, but that present Federal regulations precluded this.

Mr. Williams also commented briefly on A. B. 1567 (relating to California implementation of

Public Law 89-749—Comprehensive Health Planning). He expressed concern that the bill could grant inappropriate duties to the State Health Planning Council.

On the subject of mental health, Mr. Williams reported that the governor had recently met with representatives of concerned voluntary organizations. Mr. Williams pointed out that the budgeted amount for mental health in 1967-68 (\$203 million) is only \$3 million less than the amount budgeted for 1966-67. He also stressed that emphasis has shifted to the Short-Doyle concept of providing services to the patient in his own community. Mr. Williams presented the Council with charts showing that since 1960, the patient population in state mental institutions has decreased from 36,000 to 21,700, while the staff has increased in the same period of time. He said that under projected continuing decrease in the patient population, the current ratio of one staff person to every 2.69 patients will be maintained.

15. *State Department of Public Health*

Doctor Lester Breslow, director of the Department of Public Health, gave a progress report on certification of facilities under Medicare, stating that 535 out of California's 565 licensed general hospitals have now qualified. Almost two-thirds of the licensed nursing homes in the state have now qualified, he said, even though only one-third were expected to meet Medicare standards. Over 100 home health agencies and 553 laboratories have been given certification.

Doctor Breslow also described the department's efforts to prepare for the new proficiency testing requirement for independent laboratories under Medicare.

Doctor Carl Anderson pointed out that 269 independent laboratories now have a proficiency testing requirement for certification because they are engaged in interstate commerce and do not have medical directors who meet certain criteria. Doctor Anderson expressed the hope that proficiency testing for other laboratories would be approached on a voluntary basis at this time.

16. *Social Security Administration*

Mrs. Mercia Kahn, regional director of the Bureau of Health Insurance, Social Security Administration, reported that 18 per cent of the nation's extended care facility beds certified for Medicare are in California—with a ratio of 28.6

beds for every thousand Medicare participants. The national average, she said, is 14 beds for every thousand. Mrs. Kahn reminded the Council that Medicare had its first anniversary on 1 July 1967, and offered to supply a summary of the first year's statistics to any person who wished this information. She stated that although the statistics are quite impressive, the Social Security Administration realizes that many problems still need to be worked out under the program. Concluding her remarks, Mrs. Kahn thanked the CMA for its help during Medicare's first and difficult year.

On behalf of the CMA, President-Elect Todd expressed appreciation to Mrs. Kahn for her fine cooperation with the physicians of California.

17. *Woman's Auxiliary to the CMA*

Mrs. Dorothy Flood, president of the CMA Woman's Auxiliary, briefly reported on the recent AMA convention in Atlantic City, stating that WACMA had again won top honors for AMA-ERF contributions. In addition, she said, the Los Angeles County Woman's Auxiliary won a special award for the largest contribution from an auxiliary of over 500 members. Mrs. Flood thanked the CMA Delegation to the AMA for hospitality extended to auxiliary members during the national meeting.

18. *California Nurses' Association*

Mrs. Helen Hancock, president of the California Nurses' Association, discussed recent activities of her association in the areas of health manpower and comprehensive health planning. She also reported that the CNA had been granted exclusive rights to represent nurses in Veterans Administration facilities.

19. *California Medical Assistants Association*

Miss Helen Goldman, president of the CMAA, thanked CMA for appointment of outstanding physicians to the CMA Liaison Committee to the CMAA. She also drew attention to the national conference of the American Association of Medical Assistants, which CMAA will be hosting on 11 to 15 October 1967 in Los Angeles at the International Hotel. She stated that this should give an excellent opportunity for promotion of membership in California and asked for CMA guidance and support. Chairman Miller assured Miss Goldman that CMA fully supported the membership efforts of the CMAA and stated that one sug-

gested way in which CMA could help in current efforts would be to publicize the national convention in *CMA News*.

20. *California Committee on Regional Medical Programs*

Mr. Paul Ward, director of the California Committee on Regional Medical Programs, reported on progress under Public Law 89-239. He said that the major problem facing the programs is misunderstanding because the means of implementation have changed drastically since the "De-Bakey Report" was first issued. Mr. Ward said that by Congressional intent the key to success of these programs is synthesis—the local involvement of many groups and individuals before concepts are developed (as opposed to programs for which plans are handed down "from the top"). Mr. Ward asked for CMA help in reaching local physicians and other health professionals in areas outside of metropolitan centers so that these persons may become actively involved in the planning process.

On behalf of the Advisory Committee to CMA Representatives on the California Committee on Regional Medical Programs, Councilor Malcolm S. M. Watts presented four recommendations for Council consideration: (a) that California continue to be designated a region with sub-areas, (b) that the program in each sub-area be structured to meet its particular needs, (c) that CMA publicize its support of this program, and (d) that CMA inform local physicians concerning the nature of the program, encouraging them to participate in the development.

ACTION: *Voted to approve the above recommendations concerning California implementation of P. L. 89-239.*

21. *California Delegation to the AMA*

Doctor Eugene F. Hoffman, Sr., chairman of the CMA Delegation to the AMA, reported on the activities and accomplishments of the Delegation at the recent AMA Convention in Atlantic City. Doctor Hoffman first expressed the pride of all California physicians in the unanimous election of Doctor Dwight L. Wilbur to be AMA President-Elect and the election of Doctor Burt Davis as Trustee to the Board. Doctor Hoffman paid tribute to every member of the Delegation for his endeavors and pointed out that 15 of the 19 CMA resolutions were adopted and one referred for further consideration. Of the three remaining, one

resolution was substantially changed and only two were not adopted.

He also commented on the pleasure of the Delegation at having a number of executive secretaries join them at caucuses and said that this was a break with tradition which was long overdue.

Rather than go into a summary of actions taken at the convention, Doctor Hoffman referred the Council to AMA reports. He stated, however, that the House had voted to authorize the Board of Trustees to continue the disability insurance program with the same level of benefits and at the same premium, that it fully supported efforts to hasten the conversion of schools of osteopathy to schools of medicine, and that it took a position on therapeutic abortion similar to that taken by CMA.

Doctor Hoffman said that he, as newly-elected chairman of the Delegation, and Doctor Sam Sherman, as vice-chairman, would make every effort to deserve the confidence of the CMA. In conclusion, Doctor Hoffman congratulated CMA staff members for their dedication and devotion to the work of the Delegation.

22. *Bureau of Research and Planning*

Doctor Carl E. Anderson, chairman of the Bureau, reported that at its 7 June 1967 meeting, the subject of goals and functions for the Bureau of Research and Planning received considerable attention. Doctor Anderson presented the following as recommended *functions* of the Bureau:

1. By utilizing research capabilities of the Bureau, to provide informational service and advice to the various committees of the Association, as well as to component medical societies and to individual physicians.

2. To initiate fact-finding and analytical studies and creative programs in order to enhance the effectiveness of all segments of the Association, and

3. To report on studies and findings of other groups and individuals as they may be of interest to, or have a bearing on, the objectives and goals of the medical profession.

ACTION: *Voted to approve the above as functions of the Bureau of Research and Planning.*

Doctor Anderson also commented briefly on two major surveys under way for the Committee on Continuing Medical Education, under an NIH grant to CMERF (on behalf of the California

Committee on Regional Medical Programs). One was described as a questionnaire survey among 5,000 physicians to secure their opinions, attitudes and suggestions regarding continuing medical education; the other, as a census study of all courses and physicians who either give or take them. Doctor Anderson said that medical schools and their local cooperative arrangements are eagerly awaiting results for further planning purposes.

Regarding financial support for CMA studies, Doctor Anderson reported that an effort had been made to determine whether support of private foundations could be obtained. Contacts with several foundations corroborated previous advice to the Bureau that private foundations are not interested in going into areas of research or study where the Federal government has made a considerable commitment.

Doctor Anderson also reported the Bureau's progress on two resolutions of the 1967 CMA House of Delegates: Numbers 9 (Quality of Medical Care) and 44 (Utilization Study of Closed Panel Plans).

23. *Committee on Legislation*

Chairman Dan O. Kilroy informed the Council that the State Legislature appears to be headed for its final month. He said that although the session started off slowly, the tempo has increased markedly in the last 60 days, with many items of interest to medicine. Doctor Kilroy reviewed those bills on which there had been some action.

The Council and medical executives were reminded that Public Health League staff would be visiting component societies this fall to report on legislative activities affecting medicine.

24. *Conference with Representatives of Specialty Societies*

In the absence of Chairman Glenn A. Pope, Councilor Kaiser, a member of the ad hoc Committee on Medical Specialty Conference, drew the attention of the Council to the proposed format for the Conference, to be held 7 October 1967 at the Hilton Inn, San Francisco.

Councilor Kaiser expressed confidence on behalf of the committee that this Conference would serve as an excellent device to begin building better relationships between medical specialty organizations and the CMA. He asked that the Council designate two of its members to serve as resource persons for each of the five discussion groups at the Conference.

25. *Commission on Community Health Services*

Chairman Harold Kay commented briefly on progress of the Health Manpower Council, which had recently held two meetings, still organizational in nature. Doctor Kay also remarked on the multi-phasic screening program for cannery workers being conducted by the Health Testing Services, Inc. Doctor Kay said that the Commission recommended that CMA neither approve nor disapprove of this particular program and that if similar projects are initiated in the future, county medical societies should be involved during the early planning stages.

Doctor Kay announced that Wayne P. Chesbro had been elected vice-chairman of the Commission.

He also drew attention of the Council to changes in the Health and Safety Code pertaining to blood banks, pointing out that sections 998(b) and 1002(d) under which regulations relating to blood banks are operative, prescribe that the attending physician shall provide direct and "responsible" (rather than "immediate") supervision of the bleeding of donors. On behalf of the Committee on Blood Banks and the Commission, Doctor Kay recommended CMA concurrence with the changes in the regulations.

ACTION: Voted to concur with changes in the Health and Safety Code pertaining to blood banks which would eliminate the necessity of a physician being in immediate attendance, and call instead for responsible supervision by a licensed physician.

Doctor Kay said that this action satisfied House of Delegates Resolution No. 61-67 (Medical Supervision of Blood Banking During Unscheduled Emergency Blood Collections).

Doctor Kay announced that the AMA Council on Rural Health is considering holding its 1971 Annual Conference in California. On behalf of the Committee on Rural Health and the Commission, he recommended that CMA extend an appropriate invitation to the AMA.

ACTION: Voted to approve extending an invitation to the AMA Council on Rural Health to hold its 1971 conference in California.

Doctor Kay recommended, on behalf of the Committee on School and College Health, that it establish liaison with the American School Health Association.

ACTION: Voted to approve the establishment of liaison with the American School Health Association.

Doctor Kay discussed a proposed "Clinical Laboratory Proficiency Testing Program" and asked

for Council permission to continue to work with the California Society of Pathologists, the California Association of Clinical Laboratories, the California Society of Internal Medicine and the State Department of Public Health in working out a plan of participation in such a program for clinical laboratories.

ACTION: *Voted to authorize the Commission on Community Health Services to continue working with designated organizations on developing a program of proficiency testing for clinical laboratories.*

As the last item in his presentation, Doctor Kay recommended to the Council that it appoint Doctor Charles Baker of Oakland to serve as a "CMA reporter" on the Cytology Testing Subcommittee of the State Department of Public Health.

ACTION: *Voted to appoint Doctor Charles Baker to serve as "CMA Reporter" on the SDPH Cytology Testing Subcommittee.*

26. 26 August Meeting of Council

After some discussion about possible conflict between the AMA Communications Institute and a meeting of the Association of State Society Presidents with the 26 August 1967 meeting of the Council, the following decision was made:

ACTION: *Voted to stay with the previously scheduled date of 26 August for the next meeting of the CMA Council.*

27. Committee on Organizational Review and Planning

Doctor Jean Crum, chairman, briefly discussed subjects with which the committee is currently concerned, but is recommending no definite action at this time, including: (1) physician manpower needs in California, (2) study of the function of the previous Committee on Scientific Information, (3) committee objectives for the year (stressing the functional structure of the Association), and (4) House of Delegates Resolution 30-67 (Delegates, Limitation of Continuous Terms). On the last item, Doctor Crum pointed out that the committee felt that the problem of continuous terms for Delegates and Alternates to the CMA is one over which each District exercises local control through the process of election. He said that the record of service of the AMA Delegates and Alternates is being researched.

On behalf of the committee, Councilor Crum asked for Council approval of three recommendations, with the following results:

ACTION: *Voted to authorize the Committee for Emergency Action to designate individuals to assist as the need arises in the 1968 meeting of the National Health Council in Los Angeles (topic of the meeting is Quality in Health Care).*

ACTION: *Voted to urge Component Society Officers and Executive Secretaries to begin serious consideration of Component Society and CMA goals.*

ACTION: *Voted to establish a task force on P. L. 89-749 (Comprehensive Health Planning) charged with the responsibility to lead and to involve the profession in California.*

28. California Blue Shield

Blue Shield Board Chairman Richard S. Wilbur discussed the "Major Medicare" campaign now underway, stating that the open enrollment period will extend through 31 August 1967. Doctor Wilbur emphasized that Blue Shield is not only offering this program, designed to supplement Medicare, but is continuing to offer health protection plans to those over 65 who are not enrolled in Medicare.

Doctor Wilbur also displayed and explained a chart showing expenditures under Medi-Cal—actual expenditures from 1 May 1966 to 30 April 1967, which have been reported to the intermediaries and estimated expenditures for the fiscal year 1967-68. He pointed out that one of the most significant aspects of the chart is that while total expenditures are expected to increase substantially, the percentage of the total cost represented by physician services is expected to decrease.

ACTION: *Voted to request the CMA Commission on Communications to consider publicizing the chart, when a refined version is received from Blue Shield.*

29. Commission on Allied Health Professions and Services

Chairman Frank Melone reported that at the 28 June meeting of the Commission, Doctor Thomas W. Ledwich of Napa had been elected vice-chairman.

Doctor Melone also reported on House of Delegates Resolution No. 26-67 (Nurse-Midwife Training Program). He said that the Commission had reviewed earlier deliberations of the Committee on Other Professions concerning nurse obstetrical assistants and midwifery. This committee had expressed the idea that if a need exists in obstetrics, it also probably exists in other areas of medicine. Thus, the committee favored developing a program to attract physicians to geographic areas of need as a more realistic solution. Doctor Melone

said that this position was reaffirmed by the Commission, which recommended that further study be given to the matter by the Committee on Maternal and Child Care—as called for by Resolution 26-67. The Commission asked that findings from this study be made available to the Commission for its review and further consideration.

On behalf of the Commission, Councilor Melone recommended that the name of the Committee on Paramedical Personnel be changed to the “Committee on Allied Health Personnel.”

ACTION: Voted to authorize changing the name of the Committee on Paramedical Personnel to “Committee on Allied Health Personnel.”

30. *Report of the Scientific Board*

Chairman Longmire gave an informal preliminary report on progress of the Scientific Board in formulating recommended CMA policy in two areas of vital concern: CMA’s role in chronic disease control and CMA’s financial support for the Tumor Tissue Registry. Doctor Longmire said that recommendations on each of these subjects would be presented to the Council in written form in the near future.

31. *Report of the Commission on Hospital Affairs*

Chairman MacLaggan discussed progress of the hospital Medical Staff Survey program. He also stated that Doctor Arthur Rice of Alameda-Contra Costa Medical Association had recently reported on promising new method of standardizing hospital medical records. Doctor MacLaggan recommended that an ad hoc committee be appointed to explore new methodology in standardization (with Doctor Rice).

ACTION: Voted to establish an ad hoc Committee to Study Standardization of Hospital Medical Records (to be nominated by the Committee on Committees).

32. *Subcommittee on Long-Term Care Facilities*

Chairman Kaiser reported that the subcommittee unanimously agreed to ask Council permission to undertake a study of extended care facilities in a certain geographic area (types of patients, types of facilities, gradations of care etc.). It was pointed out that a Federal grant would have to be sought for this project, which would be done in cooperation with the Bureau of Research and Planning.

ACTION: Voted to authorize the Subcommittee on Long-term Care Facilities to proceed with plans for federally financed study of extended care facilities

(in cooperation with the Bureau of Research and Planning).

33. *Report of the Medical Executives Conference*

Mr. Eldon Geisert, chairman of the Medical Executives Conference, gave highlights of the previous day’s meeting, stressing the strong feeling of the medical executives regarding the need for telling the positive side of the story of physician participation in government programs—particularly Medi-Cal and Medicare. Mr. Geisert also reported that the MEC is extremely concerned with the problem of malpractice insurance. He reported to the Council that six new members had been nominated for submission to the Council for its approval.

ACTION: Voted to approve the following as new members of the Medical Executives Conference: Curt Searcy of Napa, John Hirsimaki of Santa Clara, Dick Church of San Joaquin, Paul Humbert of Fresno, Bob Gillies of Sacramento, and Jim Webb of Kern.

Mr. Geisert called on Mr. Clark Donmyer, chairman of the MEC Subcommittee on P. L. 89-749 (Comprehensive Health Planning). Mr. Donmyer referred to a written report which had been distributed to the Council, containing recommendations that:

a. Each component medical society take the initiative in forming local Health Planning Councils, patterned after the State Health Planning Council.

b. Such local Health Planning groups which are representative of the community take immediate steps to inventory and assess their total community environmental and personal health needs.

c. On the basis of such determination specific Health Planning Goals be established as steps to be taken to develop specific programs to alleviate or correct existing problems, or to anticipate future ones.

d. At suitable intervals such programs be evaluated to determine the effectiveness of the programs which have been developed.

e. The comprehensive health planning activities be revised at periodic intervals in order to establish new goals and programs when necessary.

ACTION: Voted to approve the above recommendations for referral to the newly established Task Force on P. L. 89-749 for implementation.

34. *Scheduling of Future Annual Sessions*

Mr. Howard Hassard reported that since the Council action authorizing staff planning for An-

nual Sessions for the coming five years, the following times and locations have been set: 1968—March 23-27 at the Fairmont and Mark Hopkins Hotels, San Francisco; 1969—March 15-19 at the Ambassador Hotel, Los Angeles; 1970—March 7-11 at the Hilton Hotel, San Francisco.

Mr. Hassard said that after 1970, it is expected that the Century Plaza Hotel in Los Angeles will have added enough meeting rooms and exhibit space to accommodate the CMA Annual Session, and that some time after 1971 sites in Anaheim and San Diego may be sufficiently developed so that they can be considered.

35. *Report of Legal Counsel*

Legal Counsel Hassard reported that in the field of malpractice, the inflationary trend has taken another boost upward. He cited several recent court decisions which indicate an unmistakable fact—that the cost to California physicians of insuring for professional liability is going up substantially.

Mr. Hassard also commented on a pending case involving medical staff privileges. He said that the decision on this case would probably establish rules which will be applicable regardless of the nature of the hospital.

36. *Membership*

On recommendation of Orange County Medical Association, Michael J. DeLuca, M.D., was reinstated as an active member.

Fifteen applicants were voted election to Associate Membership: Floyd P. Paudle, Alameda-Contra Costa County; J. Richard R. Bobb, Alonzo Cass, Donald O. Costley, John H. Morton, Howard Lawrence Rosenfeld, Los Angeles County; George L. Beatty, James Ownby, Napa County; Paul A. Bendix, Riverside County; John A. Ariando, San Bernardino County; Gilbert E. Kinyon, San Diego County; Olav N. Norman, San Francisco County; Yale Brody, San Joaquin County; Ralph Thomas Duddles, Santa Barbara County; Fred R. Lewis, Sonoma County.

Nine members were voted election to Retired Membership: Elmer J. Schmidt, Fresno County; Carroll A. McCoy, Los Angeles County; Clifford P. McCullough, Riverside County; Christopher Leggo, Sacramento County; Ruth L. Green, H. C. Mathews, San Bernardino County; Herbert W. Meyer, San Diego County; Garnett W. Hooker,

San Joaquin County; E. Dwight Barnett, Santa Clara County.

Reduction of dues was voted for 15 members for reasons of prolonged illness or postgraduate education.

37. *Roll Call*

Present were President Morrison, President-Elect Todd, Speaker Quinn, Vice-Speaker Boyle, Secretary Weyrauch and Councilors Moore, Melone, Eastman, Woolington, Goel, Pheasant, Bullock, O'Connor, Shapiro, Rogers, Crum, Watson, Maguire, Burnett, Richard Wilbur, Miller, Watts, Fenlon, Kay, Kaiser, Rose, Yant, Grunigen, Longmire and Immediate Past President MacLaggan.

Present by invitation were CMA staff members Becker, Bowman, E. Collins, J. Collins, Curley, Eberlein, Goldman, Griffith, Hetland, Jones, Klutch, Lemos, Miller, Price, Redfern, Thomas and Whelan; Messrs. Hassard and Huber, Legal Counsel, component society executives Scheuber of Alameda-Contra Costa, Rideout of Butte-Glenn, Garrick of Forty First, Lingerfelt of Fresno, Geisert of Kern, Brock of Imperial, Dalbec of Los Angeles, Sower of Marin, Colvin of Monterey, Walters of Riverside, Dochterman of Sacramento, Donmyer of San Bernardino, Nute of San Diego, Neick of San Francisco, Thompson of San Joaquin, Wood of San Mateo, Marvin of Santa Barbara, Donovan of Santa Clara, Brown of Sonoma and Bruce of Tulare; Messrs. Paton, Babb, Clark and Koch of California Blue Shield; Messrs. Read, Brown and Putnam of the Public Health League; medical school representatives Doctor Gonda of Stanford, Doctor Bauer of USC, Doctor Bostick of UC-CCM and Doctor Dillon of UCLA; Doctor Goerke of UCLA School of Public Health; Messrs. Williams and Rosen of the State Health and Welfare Agency; Doctor Breslow of the State Department of Public Health; Doctor Young of the State Department of Rehabilitation; Doctor Skelly of the State Department of Social Welfare; Doctor Nash of Camarillo State Hospital; Mrs. Kahn of the Bureau of Health Insurance, Social Security Administration; Mr. Ward and Doctor Epstein of the California Committee on Regional Medical Programs; Messrs. Gates and Gould of the AMA; Doctor Maeda of the California Veterinary Medical Association; Mrs. Flood of the Woman's Auxiliary to the CMA; Mrs. Hancock of the California Nurses' Association; Miss Goldman of the California Medical Assistants Association; Mr. Moore of the American Hospital Association; Doctors

Anderson, Elliott, Felt, Hoffman, Judd, Kilroy, Steinberg, Steinmetz and others.

38. Adjournment

The meeting was adjourned on Saturday, 8 July, at 4:45 p.m.

ALBERT G. MILLER, M.D., *Chairman*

HELEN B. WEYRAUCH, M.D., *Secretary*

535th Meeting

Tentative Draft: 535th Meeting of the Council, Los Angeles, Airport-Marina Hotel, 2 August 1967.

The meeting was called to order by Chairman Miller at the Airport-Marina Hotel near Los Angeles on Wednesday, 2 August 1967, at 8:30 p.m.

A quorum was present and acting (full roll call, including names of invited guests, appears in Item II).

Purpose of this special meeting of the Council was described as being to consider current developments regarding the Medi-Cal program and its fiscal status.

I. Chairman Miller called upon President Morrison to initiate discussion on current Medi-Cal problems and their possible solutions. The in-depth discussion which ensued included a presentation by Carel E. H. Mulder, director of the Office of Health Care Services.

After due consideration of the issues involved in Medi-Cal fiscal problems, the Council:

ACTION: *Voted to endorse the concept of placing selective controls on the small percentage of physicians who deviate from accepted patterns with regard to Medi-Cal and to request the Office of Health Care Services to make the names of such physicians available to CMA and the appropriate component societies so that designated local committees can review and act upon these cases.*

ACTION: *Voted to authorize the president of CMA and the president of the Los Angeles County Medical Association to appear at a press conference to be held on Thursday, 3 August, to inform the public*

that the basis for Medi-Cal fiscal problems lies in areas other than physician fees, and that California physicians have been actively involved in helping to provide quality care at reasonable costs under Medi-Cal and to suggest constructive actions that might be taken to alleviate fiscal difficulties under the program.

ACTION: *Voted to approve suggestions for curbing Medi-Cal costs through better utilization control methods, including, but not limited to: (a) eliminating items not medically required, (b) placing selected controls on some medical procedures, and (c) encouraging patient responsibility, possibly through a co-insurance feature. These suggestions were endorsed as acceptable alternatives to cost-cutting measures which would impair patient care (e.g. establishing a county hospital corridor for all hospitalization, discouraging physician participation through imposition of a fee schedule).*

II. Roll Call

Present were President Morrison, President-Elect Todd, Speaker Quinn, Vice-Speaker Boyle, Secretary Weyrauch, and Councilors Moore, Eastman, Woolington, Gooel, Shapiro, Bullock, O'Connor, Pheasant, Rogers, Crum, Maguire, Burnett, Richard Wilbur, Miller, Watts, Fenlon, Kay, Kaiser, Rose, Yant, Grunigen and Immediate Past President MacLaggan.

Present by invitation were CMA staff members, E. Collins, Curley, Eberlein, Klutch, Lemos, Price, Redfern, Thomas and Whelan; Legal Counsel Willett; component society executives Scheuber of Alameda-Contra Costa, Lingerfelt of Fresno, Brock of Imperial, Geisert of Kern, Dalbec of Los Angeles, Sower of Marin, Colvin of Monterey, Blough of Orange, Walters of Riverside, Dochterman of Sacramento, Donmyer of San Bernardino, Nute of San Diego, Neick of San Francisco, Wood of San Mateo, Marvin of Santa Barbara, Donovan of Santa Clara, McGowan of Sonoma and Whitehall of Stanislaus; Messrs. Read and Brown of the Public Health League; Messrs. Babb, Clark, Heller, Koch and Potloff of California Blue Shield; Mr. Mulder of the Office of Health Care Services, Mr. Shumway of the Health and Welfare Agency; Doctors Anderson, Howard, Lindsey and others.

Adjournment

The meeting was adjourned at 11:10 p.m.

ALBERT G. MILLER, M.D., *Chairman*

HELEN B. WEYRAUCH, M.D., *Secretary*